3. LESS COMPENSATION PAID FOR SERVICES OUTSIDE OF FRANKFORT		SIGNED			
4. TAXABLE EARNINGS (ITEM 2 MINUS ITEM 3)					
5. ACTUAL TAX DUE IN QUARTER AT 1.75% 6. ADJUSTMENTS (PRIOR QUARTERS) 7. INTEREST – 1% PER MONTH OR PORTION OF MONTH UNTIL PAID 8. PENALTY – 5% PER MONTH OR PORTION OF MONTH NOT TO EXCEED 25%, HOWEVER IT SHALL NOT BE LESS THAN \$25.00. 9. TOTAL TAXES DUE INCLUDING INTEREST & PENALTY	\$	OFFICIAL/ TITLEDAT PLEASE MAKE COPY FOR YOUR RECORDS TELEPHONE 502-875-8500 FAX 502-875-8502			
*IF NO WAGES WERE PAID THIS QUARTER, MARK "NONE" AND RETURN T	THIS FORM WITH EXPLANATION.	_			
NAME &		ACCOUNT NO.	FOR QUARTER ENDING	DUE ON / OR BEFORE	
ADDRESS		Make check payab	le to: FINANCE, CITY OF	FRANKFORT	
OF EMPLOYER		Mail to: LICENSE FEE DIVISION MUNICIPAL BUILIDNG P O BOX 697 FRANKFORT, KY 40602			
QUARTERLY LICENSE FEE RETURN					

] TAXABLE EMPLOYEES [

\$

MUST ENTER NUMBER OF TOTAL EMPLOYEES [
 TOTAL SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION PAID

I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN

AND ANY SCHEDULES OR EXHIBITS ATTACHED ARE TRUE AND CORRECT.

 ${\tt INDIVIDUAL,\,SELF\,\,EMPLOYED\,\,OR\,\,EMPLOYER'S\,\,QUARTERLY\,\,WITHHOLDING\,\,LICENSE\,\,FEE\,\,RETURN}$

NOTICE: THIS FORM MUST BE RETURNED WHETHER OR NOT YOU HAD EMPLOYEES DURING THIS QUARTER.